CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

(month, day, year)

STATEMENT OF ECONOMIC INTERESTS FAIR POLITICAL PRACTICES COVERS PAGE

RECEIVED

MAR 2 5 2013

Please type or print in ink.

NAME OF FILER (LAST) 15 AT A 2	CITY(WHO CHRESCENT CI
Mucray	Kathova Lee
1. Office, Agency, or Court	
Agency Name Crescent City Council Division, Board, Department, District, if applicable	City Council Member Your Position
► If filing for multiple positions, list below or on an attachment. Local Transportation Cornnission, Ruel Empire Leag Agency: Local Agency Formation Commission, Del Darte Sol	ueofCtia 2No Dice President id Waste Position: Commissioners
2. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	
City of Crescent City	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2012, through December 31, 2012.	Leaving Office: Date Left/(Check one)
The period covered is, throu December 31, 2012.	gh O The period covered is January 1, 2012, through the date of leaving office.
Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.
Candidate: Election year and office soug	ht, if different than Part 1:
4. Schedule Summary	
Check applicable schedules or "None." ▶ 7	Total number of pages including this cover page:
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-01-	interests on any schedule
herein and in any attached schedules is true and complete. I ack	
I certify under penalty of perjury under the laws of the State	
Date Signed March 15, 2013	

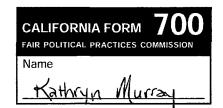
SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
Name		
Kathryn Mucray		

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
The Alliance CDFI	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
Po Box 726 Klamath CA 95531	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Community Development trancial Institute	in
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Executive Director	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$5,00 - \$1,000
▼ \$10,001 - \$100,000 □ OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of	Sale of(Real property, car, boat, etc.)
(Real property, car, boat, etc.)	
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other	Other
(Describe)	(Describe)
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	
* You are not required to report loans from commercial le	ending institutions, or any indebtedness created as part of
retail installment or credit card transaction, made in the	lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's
regular course of business must be disclosed as follow	
•	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDDESS (During Address Association)	% None
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
South State of the	
LIEUTET DALAMOE DUDING DEPORTING PERIOD	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD	
☐ \$500 - \$1,000	City
\$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other(Describe)
	. ,
Comments:	

SCHEDULE D Income - Gifts



► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
The Callery of Arts & Culture. ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
175 "H" St. Crescent C.h. C4 95531	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
DATE (MINUMANY) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
5,12,12; 75° Byt Barket	
	\$
	\$
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
	\$
	\$
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
	\$
Comments:	
Comments.	